

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		2				
5		1				
6	1					
7		1				
8		1				
9		1				
10		X				
11		X				
12	1	*				
13		1				
14		1				
15	1					
16		1				
17		2				
18	1					
19		1				
20		1				
21	1					
22	1					
23		1				
24		1				
25	1					
26		1				
27		1				
28		1				
29		X				
30		A				
31	1					
32						
33						
34						
35						
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48						
49						
50						
TOTAL IND.	9	↓		↓		↓
TOTAL DEP.	18	←		←		←
TOTAL CLAIMS	27					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS